Date Filed 07/01/25

Entry Number 52-3

Patient Activity

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Patient 1 of 1

Name: LEWIS, JONATHAN Incident #: FR221019062243 Date: 10/19/2022 Clinical Impression **Patient Information** Last LEWIS Address 1403 king st **Primary Impression Extremity Pain** First NAHTANOL Address 2 Secondary Impression Middle City Myrtle Beach **Protocols Used** Universal Patient Care - General Local Protocol Provided Care Level Gender Male SC State DOB 12/07/1983 Zip 29577 **Anatomic Position** 38 Yrs, 10 Months, 12 Days Country US Age **Onset Time** 11:00:00 10/19/2022 Weight 350,0lbs - 158,8kg Tel Last Known Well Pedi Color Physician **Chief Complaint** 244616114 knee pain SSN Ethnicity Not Hispanic or Latino Minutes Duration 45 Units Race Black or African American Secondary Complaint **Advance Directives** Duration Units Resident Status Resident Patient's Level of Distress Patient Resides in Service Area Signs & Symptoms Extremity Pain (Primary) Temporary Residence Type Falls - Fall on same level - 3 ft - Place of Injury business - 10/19/2022 Additional Injury Mechanism of Injury Blunt Medical/Trauma Trauma **Barriers of Care** None Noted Alcohol/Drugs None Reported Pregnancy No **Initial Patient Acuity** Final Patient Acuity

	Medications/Allergies/History/Immunizations
Medications	None Reported
Allergies	No known allergies
History	None Reported
Immunizations	The state of the s
Last Oral Intake	10

								Vital S	igns							
Time	AVPU	Side	POS	BP	Pulse	RR	SP02	ETC02	CO	BG	Temp	Pain	GCS(E+V+M)/Qualifiers	RASS	RTS	PTS
11:39	Alert	L	Lay	142/115 A	68 R	16 R	96 Rm						The state of the s			
11:42				1	81		99						The same of the sa	In the second		
11:44	11 57			1	64		70									
11:48	Alert	L	Lay	153/112 A	85 R	16 R	98 Rm				-					
11:48					85		99									

- 181-64	in a second	Flow Chart	
Time	Treatment	Description	Provider
11:42	BLS Assessment	Patient Response: Unchanged; Complication: None; Medical Control: Protocol (Standing Order);	ROCKENSTYRE, MATTHEW

		Assessme	ints	
Assessment Tim	ie: 10/19/2022 11:42:47			
Category	Comments	Subcategory	器機器	
Mental Status		Mental Status	~	Oriented - Event + Oriented - Person • Oriented - Place • Oriented - Time
Skin		Skin		No Abnormalities
HEENT		Head		Head: No Abnormalities
		Face		Face: No Abnormalities
		Eyes		Both Eyes: PERRL
		Neck		No Abnormalities
Chest		Chest		General: No Abnormalities
		Heart Sounds		No Abnormalities
		Lung Sounds		Not Assessed
Abdomen	N.C.	General		No Abnormalities

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Incident #: FR221019062243	
Assessments	

		Assessmen	ts				
Assessment Time: 10/19/2022 11:42:47							
Category	Comments	Subcategory					
Back _		Back	No Abnormalities				
Pelvis/GU/GI		Pelvis/GU/GI	Pelvls/GU/GI: No Abnormalities				
Extremities		Left Arm	Whole Arm and Hand: No Abnormalities				
		Right Arm	Whole Arm and Hand: No Abnormalities				
		Left Leg	Left Leg and Foot: No Abnormalities				
		Right Leg	Right Leg and Foot: No Abnormalities				
Neurological		Neurological	Not Assessed				

Narrative

M30 DISPATCHED NON EMERGENT TO A FALL, T/X NON EMERGENT BLS TO MCLEOD CF

M30 arrived in a gas station parking lot where p/t was A0x4 and sitting on the ground. P/t states they felt a pop in their knee which caused them to fall, and are not experiencing pain in that leg. When asked if they would like to be transported to the ER, p/t agrees and is assisted onto the stretcher where they are secured according to the manufacturers guidelines. Once in m30 a bis assessment is given and no abnormalities are found, vitals are taken and reassessed throughout transport, remaining stable. Upon arrival to the ER, handover was made with an RN and M30 goes back in service.

Anatomic	None	Trauma Activation No
Physiologic	None	Time
Mechanical	None	Date
Other Conditions	None	Trauma level
Andrew Control of the Party of	A STATE OF THE PROPERTY OF THE	Reason Not Activated

Specialty Patient - Outbreak Screening

Unable to Obtain - Not Indicated

ncident Details		Destination Details	and the second of the second o	Incident Times	
Location Type	Place of Business	Disposition	Transported No Lights/Siren	PSAP Call	
Location		Unit Disposition		Dispatch Notified	11:20:51
Address	1695 HWY 501	Patient Evaluation and/or Care Disposition		Call Received	11:20:51
Address 2		Crew Disposition		Dispatched	11:21:25
Mile Marker	8	Transport Disposition		En Route	11:21:33
City	Myrtle Beach	Reason for Refusal or Release		Staged	8
County	Horry	Transport Mode Descriptors	No Lights or Sirens	Respon Scene	
State	SC	Transport Due To	Closest Facility	On Scene	11:32:50
Zip	29577	Transported To	McLeod Carolina Forest Emergency	At Patient	11:33:00
Country	US	Requested By	Patient	Care Transferred	
Medic Unit	M30	Destination	Hospital	Depart Scene	11:42:14
Medic Vehicle	03788	Department	Emergency Room	At Destination	11:53:54
Run Type	911 Response	Address	101 McLeod Health Blvd.	Pt. Transferred	12:04:00
Response Mode	Non-Emergent	Address 2		Call Closed	12:05:26
Response Mode Descriptors	No Lights or Sirens	City	Myrtle Beach	In District	
Shift	C Shift	County	Horry	At Landing Area	
Zone	S Comments	State	sc	The sales of the s	
Level of Service	Basic Life Support	Zip	29579		
EMD Complaint	Falls	Country	US		
EMD Card Number	17FALLA	Zone			
Dispatch Priority		Condition at Destination	Unchanged	15	
		State Wristband #			
		Destination Record #			
		Trauma Registry ID			and the state of the same of t
		STEMI Registry ID			
		Stroke Registry ID			

		Crew Members
Personnel	Role	Certification Level
ROCKENSTYRE, MATTHEW	Lead	EMT-Basic - SC602465; NREMT-Basic (NREMT-B) - E3662360

Horry County Fire Rescue Patient Care Record 3-CV-01720-JD Name: LEWIS, JONATHAN

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Crew		

YOUNG, BRANDON	Driver	EMT-Paramedic - SC505378; NREMT-Paramedic (NREMT-P) - M5109695
	Krare - con the contract of th	English the second of the seco

	Mileage		Delays			
Scene	1.0	Category	Delays			
Destination	7.0	Dispatch Delays	None/No Delay			
Loaded Miles	6.0	Response Delays	None/No Delay			
Start		Scene Delays	None/No Delay			
End	The state of the s	Transport Delays	None/No Delay			
Total Miles		Turn Around Delays	None/No Delay			

Personal Items			
Item	Given To	Comment	
Cell Phone/Pager			
Driver License		The state of the s	
Purse/Wallet			

Patient Transport Details			
How was Patient Moved to Ambulance	Assisted/Walk, Stretcher	How was Patient Moved From Ambulance Stretcher	
Patient Position During Transport	Semi-Fowlers	Condition of Patient at Destination Unchanged	